

# OWTS PROFESSIONAL INFORMATION UPDATE

## Missouri Department of Health and Senior Services

### Onsite Sewage Program

Mail or fax completed form to:

Missouri Department of Health and Senior Services  
Onsite Sewage Program  
P.O. Box 570  
Jefferson City, MO 65102-0570  
Fax 573-526-7377

Submit a **separate form** to update information for each OWTs Professional registration.

Please check <b>only one</b> :			
<input type="checkbox"/> Installer	<input type="checkbox"/> Inspector	<input type="checkbox"/> Soil Evaluator	<input type="checkbox"/> Perc Tester
Name: – First MI Last			ID Number
Verify Social Security Number in database (Last 5 digits):      *   *   *   _   *   _			
<input type="checkbox"/> Change of <b>Business Address</b> (as shown on list):			
Address		City	State      Zip
<input type="checkbox"/> Change of <b>Mailing Address</b> (if different):			
Address		City	State      Zip
<input type="checkbox"/> Change of Phone Number(s):			
Business Phone Number		Contact Phone Number	Fax Number
(   )      –		(   )      –	(   )      –
<input type="checkbox"/> Change Counties of Availability:			
Home County			
Other counties			
1)		2)	3)      4)
Check the following box(es) if you prefer NOT to have your name on the OWTS Professional List:			
<input type="checkbox"/> Do not include my name on the website list for the Registered Professional checked above (include my name on other published lists).			
<input type="checkbox"/> Do not include my name on ANY lists for the Registered Professional checked above.			
Signature			Date

